

**Centre for Work
Health and Safety**

Australian WHS Survey

Spring 2023 edition



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Centre for Work Health and Safety.



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Executive summary

The Australian WHS Survey (the Survey) is an initiative from the Centre for Work Health and Safety (the Centre). It is the first of its kind in Australia and provides a platform for workers from across the nation to share their first-hand experiences of Work Health and Safety (WHS).

The Survey helps characterising the current state of WHS in Australia in three aspects. It provides:

- **the WHS profile of Australian workers**, e.g., their exposure to physical and psychosocial hazards, including harassment, their awareness of WHS rights and responsibilities, and their feelings of empowerment to participate in, and influence, health and safety at work;
- **the WHS profile of Australian workplaces** through respondents' perceptions of their workplace's existing WHS policies and systems, demonstrated WHS commitment and practices, and views about the barriers and potential enablers to improve WHS in their workplaces;
- **the new or emerging WHS issues** observed or experienced by the respondents and their suggestions for potential harm prevention measures.

This information is critical in assisting Australian businesses, WHS regulators and affiliated bodies to prevent workers from being harmed in the workplace. The Survey will be open for response every six months. This 2023 Spring Edition provides insights based on data collected in August 2023, and insights based on comparisons made with data collected for the 2023 Autumn Edition.

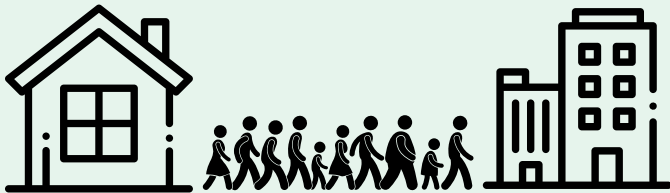
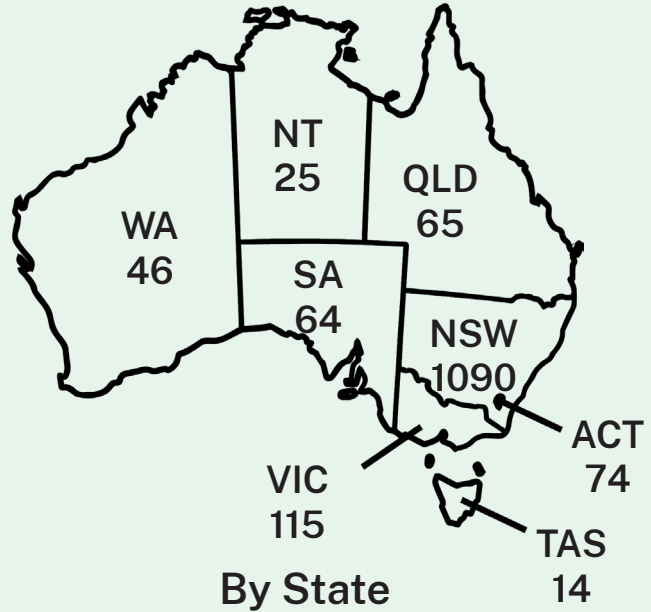
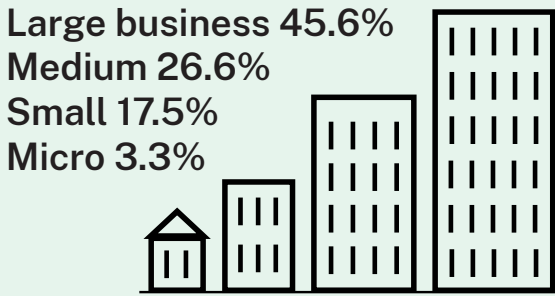


Australian WHS Survey Demographics



1493 participants
(↑46%, April 2023)

Business Size



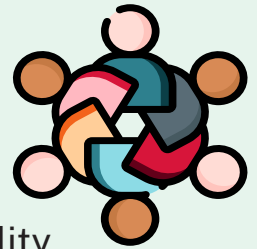
Workforce is moving back to the workplace

3.7% working solely from home (↓21.1%)
64% working solely from workplace (↑26.4%)

36.4% were part of a diverse group

- 165 CALD
- 141 Aboriginal and Torres Strait Islander
- 132 LGBTQIA+
- 118 Migrants
- 109 Living with disability

Diversity



Top five industries by participants



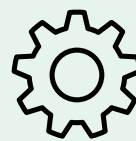
Healthcare
238 (15.9%)



Construction
145 (9.7%)



Education
123 (8.2%)



Professional
118 (8.2%)



Manufacturing
101 (6.7%)

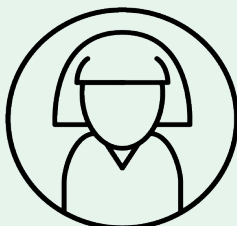
Age groups

Young Workers
< 25 years



91
(6.1%)

Mid-career Workers
25 - 44 years



911
(60.8%)

Older Workers
45+ years



486
(32.4%)

Gender



847 Female



613 Male



12 Non-Binary



21 Other*

*Use another term, prefer not to say



Australian WHS Survey Profile



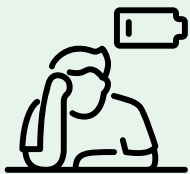
Exposure to hazards



81% exposed to MSD-related hazards on a weekly basis (↑20%)



16% exposed to bullying and harassment at work on a weekly basis (↓11%)



2/3 of workers still reporting Burnout - Health care and Education ranking highest.



Exposure to psychosocial hazards

- 21.3% Low job fairness (↓7.1%)
- 22.0% Low job control (↓5.2%)
- 22.8% Low job security (↓7.9%)
- 23.1% High job demand (↓12%)

Sexual harassment in the workplace



8.8% have experienced sexual harassment
20% would never report the incident

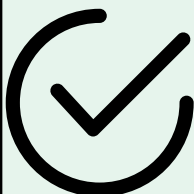


50% want change to policy
5% who reported saw change to policy
40% of those who reported saw no change

Respondants were more likely to experience sexual harassment if they were:

Female (10.7%)	Work in a small business (12.2%)	Aboriginal or Torres Strait Islander (13.6%)
CALD (14.5%)	A young worker (15.4%)	Living with a disability (15.7%)
		LGBTQIA+ (19.1%)

Workplaces and their WHS



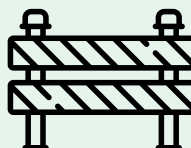
Greater confidence in WHS systems in place

Greater confidence in WHS commitment of workplaces



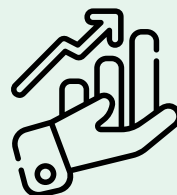
Top 3 enablers for good WHS

- Strong leadership and commitment
- Active risk assessment and management
- Training and education



Top 3 barriers to good WHS

- lack of time and resources
- Other priorities
- cost of setting up good WHS



Top 3 drivers for good WHS

- More valued by workers'
- Thought that someone might get seriously hurt
- Impact on business' reputation

The following findings are of particular importance.

Higher exposure to hazards associated with MSD, lower exposure to psychosocial hazards and harassment.

A total of 1,493 participants completed the survey between 1st and 31st August 2023, an increase of nearly 50% from the 2023 Autumn Edition.

While the survey is not representative of the Australian workforce, when compared to the 2023 Autumn Edition, results showed a higher prevalence of workers' exposure to hazards associated with Musculoskeletal Disorder (MSD) and a lower prevalence of exposure to harassment and psychosocial hazards. Over 81% of participants were indeed exposed to at least one form of MSD-related hazards on a daily or weekly basis, an increase of approximately 20% compared to the Autumn edition six months ago.

In contrast, while more than half of participants (769 or 51.5%) reported having experienced bullying and/or harassment at work at least once since employment, results showed a systematically lower prevalence of exposure to nearly all forms of harassment in comparison to six months ago. This included exposure to verbal harassment (53.3% vs 63.5% in Autumn), sexual (17.2% vs. 24.7%, respectively), physical (11.2% vs. 20.0%, respectively) and discrimination (23.8% vs. 25.8% respectively).

Participants also reported lower prevalence of exposure to psychosocial hazards: high job demand (23.1% vs. 28.4% in Autumn), low job control (22.0% vs. 27.2%), low job security (22.8% vs. 30.7%), and low effort-reward fairness (21.3% vs. 35.1%). As a result, a lower proportion of participants was found to be 'at risk' of psychosocial harm (7.5% vs. 16.3%).

While the prevalence of exposure to psychosocial hazards decreased, the prevalence of burnout remains at a high level with two out of three participants feeling burnout (63.4%), similar to the Autumn's proportion.

Little action taken after the occurrence of sexual harassment

Female workers, young workers, and those working in small/micro businesses were the groups found most likely to experience sexual harassment. This is consistent with findings from the previous edition and other older reports (the National inquiry into sexual harassment in Australian workplaces in 2020¹).

Results showed that nearly 4 out of 10 victims of sexual harassment would systematically report the incident, while 2 out of 10 would never do so. The greatest reason for not reporting

¹ Australian Human Rights Commission. 2020. Respect@Work: National Inquiry into Sexual Harassment in Australian Workplaces.

sexual harassment was fear: fear of not being taken seriously, fear of the potential negative impact on the relationships at work, or on the career more generally.

Interestingly, while 1 out of 2 victims of sexual harassment wishes incidents would lead to changes in existing policies, only 1 out of 20 (of those who actually reported the incident) witnessed real changes in existing policies, and 4 out of 10 witnessed no changes of any kind.

Greater confidence in workplaces' WHS systems and commitment – lack of time and resources still the greatest barrier to good WHS

Participants felt more confident about the WHS systems and practices in place in their workplace, and about their workplace's commitment to WHS, in comparison to the previous edition.

The most common barriers to good WHS were similar to those reported in Autumn: the lack of time or resources came first (45%), followed by the de-prioritisation of WHS over other business priorities (38%) and the cost implications of setting up good WHS (31%). These 3 top barriers were consistent across sectors and business sizes.

Training and education (48%), strong leadership and commitment (45%), and active risk assessment and management (42%) were also consistently selected across sectors and business sizes as the top three enablers of good WHS. Workers of the Health care sector were an exception as they preferred communication and consultation as the top enabler of good WHS for their sector.

Finally, WHS being more valued by workers, the potential impact of WHS on the reputation of the business, and the thoughts of someone getting seriously hurt, were found as the top drivers of good WHS overall. WHS being more financially rewarding, and simpler to understand were the top drivers for workers in Agriculture.

Workers working from home only (WFH), working from the office/multiple work site(s) and those in hybrid arrangements experience different WHS realities.

Two out of three participants reported working from the office/multiple work site(s), which is an increase compared to the 58.8% found in the Autumn Edition, six months ago. In contrast, only 3.7% of participants reported working from home only (WFH), which is a decrease compared to the 4.6% of the last edition. There was also a decrease in the proportion of participants worked in a hybrid way, that is flexibly, 28.0% compared to the 32.9% of the previous edition. All together, these results could indicate that workers have initiated their return to the office.

While workers from the office/multiple work site(s) were the ones most likely to experience verbal harassment, workers WFH were found significantly more likely to experience physical

abuse/harassment than workers from the office/multiple work site(s) or those working in hybrid arrangements. They also expressed lower level of WHS awareness than workers from the office/multiple work site(s), and felt less confident about their workplace's WHS system than those working in hybrid arrangements. These results support well documented concerns for this group of workers due to the challenge in setting the boundaries between work and personal life, and higher risk of domestic violence as well as higher prevalence of alcohol consumption than other work arrangements (from the office/multiple work site(s), or hybrid).

Another call for prioritisation of WHS for Health care workers

The largest cohort of participants came from the Health care sector. Similar to our findings in Autumn, this sector was among the top 3 showing the highest prevalence of exposure to harassments (particularly verbal, psychological and discrimination), and to nearly all major psychosocial job quality hazards (including high job demand, low job control and low effort-reward fairness). While the sector showed the second highest level of WHS awareness (rank second behind the Construction sector), it came fifth (i.e. before last, among the six sectors being compared) in terms of WHS empowerment. In a similar vein, Health care workers were the least appreciative of their workplace's WHS system and commitment to good WHS, ranking sixth and last in our comparison.

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Background

Overview of the survey

The Australian WHS Survey (the Survey) is administered by the NSW Government's Centre for Work Health and Safety (the Centre), a collaborative research body that drives a smarter approach to the way we think and act about work health and safety.

The Survey is the first of its kind in Australia; it captures workers' experiences, perspectives and views about WHS and their perception of WHS practices existing in their workplace. It informs about:

- the current WHS profile of Australian workers, that is, their exposure to physical and psychosocial hazards, WHS awareness and empowerment;
- the current WHS profile of Australian workplaces, that is, existing WHS systems and practices, WHS commitment, barriers, and enablers;
- new and emerging WHS issues and potential preventative measures that might be considered in the workplace;
- at-risk sectors, including characteristics about workers and workplaces who may be a greater risk of experiencing WHS issues; and
- leading indicators of strong WHS practices.

The Survey provides a relevant, current and robust assessment of the WHS landscape in Australia and will be used to assist the Centre, Australian businesses, WHS regulators, and other affiliated bodies, in their respective journey to prevent workers from being harmed.

This 2023 Spring Edition collected data through a survey open in August 2023 to people who were over 18 years of age, currently living in Australia, and had worked in Australia in the previous six months. The Survey will be open for response every six months. This 2023 Spring Edition also provides insights from comparisons made with data collected for the precedent 2023 Autumn Edition.

Method

Survey design

The Survey considered five sections including:

- **Demographic characteristics** with five questions about the participant's gender, age group, highest education attainment, identification to one or more of the diversity groups (LGBTQIA+, Aboriginal and/or Torres Strait Islander, Culturally and/or linguistically diverse, Migrant or temporary resident, People living with disability); and language spoken at home.
- **Employment characteristics**, with seven questions about the participant's role (worker, manager or executive etc), employment's type (permanent, fixed-term or casual etc), location (the state where they had most working hours), sector of employment, organisation's size (micro, small, medium or large), employer's type, and working structure (work from home only, office/work site(s) only or hybrid).
- **Worker's WHS profile**, covering leading indicators to assess exposure to physical and psychosocial hazards at worker level with questions from validated tools including Occupational Health and Safety Vulnerability measure (OHSVM) developed by Lay et al. 2016², and the Psychosocial Job Quality (PJQ) Measure developed by Butterworth et al. 2011³. This 2023 Spring Edition also included four questions enquiring the reporting of bullying and harassment.
- **Workplace WHS profile**, with questions from the OHSVM about workplace policies and procedures for WHS, the workplace commitment to WHS, and questions about barriers to, enablers of and drivers of good WHS practices.
- **Future of work**, with questions about any new or emerging WHS issues (e.g. new hazard, new work style, new technology, new legislation) that worker experienced or witnessed in the past six months.

2 Lay, A. M., Saunders, R., Lifshen, M., Breslin, C., LaMontagne, A., Tompa, E., & Smith, P. (2016). Individual, occupational, and workplace correlates of occupational health and safety vulnerability in a sample of Canadian workers. *American Journal of Industrial Medicine*, 59(2), 119-128. doi: 10.1002/ajim.22535

3 Butterworth, P., Leach, L. S., Strazdins, L., Olesen, S. C., Rodgers, B., & Broom, D. H. (2011). The psychosocial quality of work determines whether employment has benefits for mental health: results from a longitudinal national household panel survey. *Occupational and Environmental Medicine*, 68(11), 806-812. doi: 10.1136/oem.2010.059030

Participants

The Survey was distributed online via the Qualtrics XM platform and open to all people who met the following inclusion criteria:

- over 18 years of age,
- currently living in Australia, and
- worked in Australia in the last six months.

The Survey was open from 1 to 31 August 2023.

The Survey was promoted following a range of channels, including: the use of organic and paid advertising on social media accounts owned by the Centre, along with direct email to mailing lists established by the Centre. The Survey was also advertised on NSW Government webpages, in NSW Government newsletters and on NSW Government-owned social media accounts. Intermediary organisations were also utilised to distribute the Survey amongst their networks (see Appendix B for a summary of all distribution channels utilised and their reach). Upon completion of the Survey, respondents were offered a lottery-style incentive that gave them a chance to win a \$500 gift card.

Ethical and privacy considerations

Participation in the Survey was on a voluntary basis, and respondents' consent was implied by their decision to complete it. Prior to undertaking the Survey, participants were provided information about the Centre, the inclusion criteria for participation, the risks and benefits of completing the Survey, and how the data collected would be analysed, reported on, stored and used. The Survey included information about psychological support services available, including Lifeline and Beyond Blue, in the event that participation caused distress or discomfort. Information gathered in the Survey was de-identified at the point of analysis and managed in accordance with the Privacy and Personal Information Protection Act 1998 (PPIP Act) and the Health Records and Information Privacy Act 2002 (HRIP Act).

Analysis

WHS hazards

The validated tool OHSVM developed by Lay et al., 2016 was used to capture worker's exposure to hazards, their awareness and empowerment in WHS and their workplace policy and procedure or system for good WHS practice. The tool consists of a sub-scale Exposure to hazards including 9 statements asking participants to rate their frequency of exposure to various hazards at their workplace (ranging from never, once a year, every 6 months, every 3

months, every month, every week to every day). In addition to the measure of 'exposure to hazard' using Lay et al. 2016 method, we included an additional measure of participants weekly/daily exposure to any of the nine hazards listed, and participants weekly/daily exposure to musculoskeletal disorder related hazards. The latter considered ratings to the statements: 'Manually lift, carry, or push items heavier than 20 kg at least 10 times a day', 'Do repetitive movements with your hands or wrists (packing, sorting, assembling, cleaning, pulling, pushing, and typing) for at least 3 hours during the day', 'Work in a bent, twisted, or awkward posture', 'Work at a height that is 2 metres or more above the ground or floor, 'Stand for more than 2 hours in a row'.

Regarding exposure to psychosocial hazards, the validated Psychosocial Job Quality Index (PJQI) was used to provide measures for (1) Job demands and complexity, (2) Job control, (3) Job security and (4) Effort to reward fairness. The method published by Butterworth et al. 2011 and Collie et al. 2017 was used to identify participants the most at-risk of psychosocial harm based on their exposure to 'high' job demand, 'low' job control, 'low' job security and 'unfair' effort-reward.

All other indices were calculated following the method described in the first edition of the Australian WHS Survey, i.e. the 2023 Autumn Edition (see Appendix C).

Quantitative Analysis

Descriptive statistics including count and percentage (for categorical variables) and mean value (for index score variables) were used to analyse the quantitative data. Chi-square and fisher exact tests were employed to test for statistically significant difference in the distribution of exposure to WHS hazards across sub-groups of demographic and employment characteristics. T-test and ANOVA test were used for statistical comparisons between/across groups in the index scores (including burnout, WHS awareness, empowerment, workplace WHS system score, and workplace commitment to WHS score). All quantitative analyses were conducted using R statistical package in RStudio.

Qualitative Analysis

Open-ended questions in the Survey were analysed thematically. Responses were first analysed to identify key and recurring themes or concepts. These themes or concepts were then used to develop a thematic framework. This process was inductive, meaning the themes were iteratively constructed based on the responses themselves.

Limitations

The Survey's sample is not considered to be representative of Australia's labour force, even though it contains comparable proportions of respondents to labour force data across age groups and some major industries. The Survey was disseminated online and promoted via multiple channels, including social media and WHS events, with a more focused presence in NSW. As a result, NSW was more represented than other states/territories.

Results

Participants' profile

There was a total of 1,493 valid responses to the Survey. This was a significant increase of nearly 50% in the number of responses in comparison to the previous edition (1,017 valid responses). Demographic and employment characteristics of participants are presented in Table 1. Of 1,493 participants, the majority were females (847 or 56.5%), which is nearly 9% more than the female representation in the entire Australian work force in July 2023.

All workers aged 18 years or over in Australia were eligible to take part in the Survey. Those in the age group of 35-44 years accounted for the largest proportion (31.6%), followed by those aged between 25-34 years (29.2%) and those aged between 45-54 years (19.4%). These are also the age groups with the largest proportions in current Australian work force.

The Survey's cohort seems to show a higher level of education than reflected in the Australian workforce, with 686 or 45.8% of participants who completed a bachelor or postgraduate degree, approximately 12% more than in the Australian workforce. Similarly, only 168 or 11.2% of participants had completed year 12 or lower, which is 20% lower than the national proportion.

Those working in NSW were the most represented (72.8%), followed by those working in Victoria (7.7%). Participants from Tasmania and Northern Territory were the least represented, accounting for 0.9% and 1.7% of the Survey's cohort, respectively.

At-risk communities were relatively well represented, with 109 (6.8%) people living with disability, 118 (7.4%) migrants or temporary residents, 132 (8.2%) LGBTQI+, 141 (8.8%) Aboriginal and/or Torres strait islanders, and 165 (10.3%) people of culturally and/or linguistically diverse background. A majority of participants reported speaking English at home (86.8%).

Table 1. Demographic characteristics of the participants in the Australian WHS Survey for the 2023 Spring Edition (this Survey) and the 2023 Autumn Edition (previous Survey).

	This Survey		Previous Survey	
	n	%	n	%
Gender				
Male	613	40.9%	495	49.2%
Female	847	56.5%	472	46.9%
Others	38	2.5%	39	3.9%
Age groups				
18 to 24	91	6.1%	63	6.3%
25 to 34	437	29.2%	285	28.3%
35 to 44	474	31.6%	272	27.0%
45 to 54	291	19.4%	216	21.5%
55 to 64	175	11.7%	141	14.0%
65 or over	20	1.3%	24	2.4%
NA	10	0.7%	5	0.5%
Education				
Postgraduate Degree	268	17.9%	181	18.0%
Bachelor degree	418	27.9%	240	23.9%
Diploma/Trade certificate	617	41.2%	434	43.1%
Year 12 or below	168	11.2%	139	13.8%
Diversity				
LGBTQIA+	132	8.2%	146	14.5%
Aboriginal and Torres Strait Islander	141	8.8%	135	13.4%
CALD	165	10.3%	142	14.1%
Migrants	118	7.4%	79	7.9%
People living with disability	109	6.8%	96	9.5%

In terms of employment characteristics, participants working in the Health Care and Social Assistance sector (*Health care sector here after*) accounted for the largest proportion 15.9% (or 238 participants), followed by Construction (9.7% or 145 workers) and Education and Training (*Education hereafter*) (8.2% or 123 workers). Industries with the least representation were Information Media and Telecommunications (1.0%), Rental, Hiring and Real Estate Services (1.1%) and Wholesale Trade (1.7%).

Most participants identified as worker in their current employment (57.7%), followed by Executive/Board member (24.2%), volunteer (7.0%) and only 2.3% identified as supervisor or manager. Majority of respondents were on a permanent employment (68.7%), followed by those on a casual arrangement (10.9%), and fixed term contract (7.5%). Most participants were working for large organisations, which are those with 200 or more employees (49.0%), followed by medium organisations (28.6%) and small and micro businesses (18.8%). Almost half of the participants (45.5%) were in the private sector, the remaining working for the government (27.1%) or a public company (15.0%).

Finally, 64% or two out of three participants working from office/work site(s), including 40% of participants reported working in the office only and another 24% working across multiple work site(s), which is an increase compared to the 22.4% found in the Autumn Edition, six months ago. In contrast, only 3.7% of participants reported working from home only, which is a decrease compared to the 4.6% of the last edition. There was also a decrease in the proportion of participants worked in a hybrid way, that is flexibly, 28.0% compared to the 32.9% of the previous edition. All together, these results could indicate that workers have initiated their return to the office, with flexible working becoming a 'normal' way of working (one out of four workers).

Table 2. Employment characteristics of the participants in the Australian WHS survey for the 2023 Spring Edition (this Survey) and the 2023 Autumn Edition (previous Survey).

	This Survey		Previous Survey	
	n	%	n	%
Industry				
Health Care and Social Assistance	238	15.9%	155	15.2%
Construction	145	9.7%	115	11.3%
Education and Training	123	8.2%	102	10.0%
Professional, Scientific and Technical Services	118	7.9%	54	5.3%
Manufacturing	101	6.7%	83	8.2%
Public Administration and Safety	89	5.9%	91	8.9%
Transport, Postal and Warehousing [^]	86	5.7%	30	2.9%
Financial and Insurance Services	70	4.7%	41	4.0%
Retail Trade	66	4.4%	40	3.9%
Administrative and Support Services	64	4.3%	36	3.5%
Arts and Recreation Services	49	3.3%	6	0.6%
Electricity, Gas, Water and Waste Services	43	2.9%	41	4.0%
Accommodation and Food Services	36	2.4%	12	1.2%
Agriculture, Forestry and Fishing [*]	35	2.3%	70	6.9%
Mining	35	2.3%	36	3.5%
Wholesale Trade	25	1.7%	9	0.9%
Rental, Hiring and Real Estate Services	16	1.1%	15	1.5%
Information Media and Telecommunications	15	1.0%	11	1.1%
Other	144	9.6%	70	6.9%
Role				
Worker	865	57.7%	586	57.6%
Supervisor/Manager	34	2.3%	286	28.1%
Executive/Board member	363	24.2%	98	9.6%
Health and Safety Representative	47	3.1%	78	7.7%
Sole trader/Freelancer/Consultant	53	3.5%	47	4.6%
Volunteer	105	7.0%	68	6.7%
Other	31	2.1%	31	3.0%
Organisation size				
1-4 workers	50	3.3%	51	5.0%
5-19 workers	262	17.5%	218	21.4%
20-199 workers	398	26.6%	280	27.5%
200 or more workers	683	45.6%	421	41.4%
Working structure				
Work at office only	599	40.0%	346	34.0%
Work at home only	55	3.7%	47	4.6%
Work flexibly	420	28.0%	335	32.9%
Work at multiple sites	360	24.0%	252	24.8%
Work in my vehicle	39	2.6%	18	1.8%
Other	25	1.7%	19	1.9%

Note: [^] Transport sector hereafter; ^{*}: Agriculture sector hereafter.

Workers' WHS profile

Exposure to hazards and musculoskeletal disorders (MSDs) hazards

Table 3 shows the numbers and the percentages of participants with various frequency of exposures to different types of hazards. The hazards with the highest prevalence of exposure on a daily or weekly basis were 'Repetitive movements with hands or wrists (packing, sorting, assembling, cleaning, pulling, pushing, and typing for at least 3 hours during the day' (68.8%), 'Stand for more than 2 hours in a row' (43.7%), and 'Work in a bent, twisted, or awkward posture' (33.7%). A large proportion of participants (84.3%) reported having been exposed to at least one of those nine hazards on a weekly basis, an increase of nearly 20% compared to the previous edition (64.7%). Similarly, a large proportion of participants (81%) reported having been exposed to at least one of the four hazards associated with musculoskeletal disorders (MSDs) (including repetitive movements, standing for 2 hours or more, work in awkward position, manual handling, and work at height), on a daily or weekly basis, an increase over 20% compared to the previous edition.

Table 3. Frequencies of participants exposure to nine types of hazards.

		Every day	Every week	Every month	Every 3 months	Every 6 months	Once a year	Once since employment	Never
Repetitive movements at least 3 hrs a day	n	859	168	64	42	31	39	33	236
	%	57.5	11.3	4.3	2.8	2.1	2.6	2.2	15.8
Stand for 2+ hrs	n	455	198	106	90	46	45	30	501
	%	30.5	13.3	7.1	6.0	3.1	3.0	2.0	33.6
Work in a bent, twisted or awkward posture	n	303	200	107	58	66	58	66	581
	%	20.3	13.4	7.2	3.9	4.4	3.9	4.4	38.9
Manual handling (lift/ carry/ push 20+kg)	n	233	146	100	59	56	80	58	716
	%	15.6	9.8	6.7	4.0	3.8	5.4	3.9	48.0
Hazardous substances	n	227	151	85	86	43	80	55	707
	%	15.2	10.1	5.7	5.8	2.9	5.4	3.7	47.4
Work in high noise level	n	207	191	93	66	60	64	46	739
	%	13.9	12.8	6.2	4.4	4.0	4.3	3.1	49.5
Work at height, 2+m above ground/floor	n	109	118	96	47	43	57	33	954
	%	7.3	7.9	6.4	3.1	2.9	3.8	2.2	63.9
Bullying/ harassment	n	100	141	115	98	77	85	153	691
	%	6.7	9.4	7.7	6.6	5.2	5.7	10.2	46.3
Perform unfamiliar work tasks	n	88	161	180	155	123	109	78	513
	%	5.9	10.8	12.1	10.4	8.2	7.3	5.2	34.4

Detailed analyses of weekly and daily exposure to the top three hazards by demographic and employment characteristics are presented in Table 4. Chi-squared statistical analyses revealed that female workers, older workers, those working in Transport and Health care sectors, and those working in large organisations were significantly more exposed to 'repetitive movements' (on daily or weekly basis). In contrast, male workers, young workers, and those working in Construction industries were significantly more exposed to 'standing for 2 hours or more'. Construction workers and those working in the office or work site(s) only were also found to be significantly more exposed to working in 'bent, twisted or awkward position'.

Table 4. Frequencies of participants weekly/daily exposure to the top three hazards by demographic and employment characteristics.

	Repetitive movements			Stand 2+hrs			Awkward posture		
	n	%	p [^]	n	%	p [^]	n	%	p [^]
Demographics									
Gender									
Male	374	61.3		319	52.3		209	34.3	
Female	626	74.1	.000	320	37.9	.000	283	33.5	.759
Age groups									
Young (<25)	74	81.3		60	65.9		40	44.0	
Middle (25-44)	601	66.3		378	41.7		299	33.0	
Older (45+)	345	71.1	.005	212	43.7	.000	162	33.4	.105
LGBTQIA+									
No	934	68.6		593	43.5		468	34.4	
Yes	93	71.0	.569	60	45.8	.618	35	26.7	.077
Aboriginal and Torres Strait Islander									
No	946	69.9		595	44.0		465	34.4	
Yes	81	57.9	.003	58	41.4	.563	38	27.1	.085
CALD									
No	931	70.1		591	44.5		461	34.7	
Yes	96	58.2	.002	62	37.6	.091	42	25.5	.018
Migrants									
No	961	69.8		599	43.5		458	33.3	
Yes	66	56.4	.003	54	46.2	.583	45	38.5	.255
People living with disability									
No	945	68.2		607	43.8		461	33.3	
Yes	82	75.9	.096	46	42.6	.803	42	38.9	.235
Employment characteristics									
Key industries									
Construction	101	68.7		102	69.4		72	49.0	
Health care	194	76.7		119	47.0		112	44.3	
Manufacturing	58	57.4		50	49.5		28	27.7	
Education	86	69.9		60	48.8		46	37.4	
Transport	83	77.6		55	51.4		51	47.7	
Agriculture	16	44.4	.000	17	47.2	.001	13	36.1	.011
Business size									
Small/micro	204	65.6		142	45.7		118	37.9	
Medium	253	63.9		187	47.2		133	33.6	
Large	494	72.5	.006	274	40.2	.056	209	30.7	.077
Work role									
Worker	656	75.2		393	45.1		347	39.8	
Manager/Executive	234	58.1		169	41.9		95	23.6	
HSR	25	47.2	.000	19	35.8	.287	8	15.1	.000
Work structure									
Home only	34	60.7		9	16.1		13	23.2	
Office only	682	70.5		556	57.4		392	40.5	
Hybrid	274	65.2	.069	65	15.5	.000	68	16.2	.000

Note: [^] p-value for chi-square/fisher's exact tests for statistically significant difference in the distribution by sub-groups.

Bullying and harassment

More than half of participants (769 or 51.5%) reported having experienced bullying and/or harassment at work at least once since employment. Results showed a significant decrease in the proportion of participants having experienced bullying and/or harassment at work in the last 12 months, from 56% in the last edition to 41.3% in this current edition. Table 5 shows the prevalence of bullying and/or harassment at work by different types experienced by participants. The verbal bullying and/or harassment was the one most commonly experienced (53.3%); closely followed by psychological harassment (50.1%).

Table 5. Frequencies of participants by type of bullying/harassment experienced (among those who reported ever been bullied/harassed). For the 2023 Spring Edition (this Survey) and the 2023 Autumn Edition (previous Survey).

Type of harassment	This Survey		Previous Survey	
	n	%	n	%
Verbal	410	53.3	372	63.5
Psychological	385	50.1	304	51.9
Discrimination	183	23.8	151	25.8
Sexual	132	17.2	145	24.7
Physical	86	11.2	117	20.0

Comparisons of exposure to various types of bullying and/or harassment at work as a function of demographic and employment characteristics are presented in Table 6. Chi-squared and Fisher's exact⁴ statistical analyses revealed that older workers, Transport and Health care workers, those working in large organisations and those working in the office/work site(s) only were the groups most likely to experience verbal bullying/harassment. Female workers, young workers, and those working in small/micro organisations were the groups most likely to experience sexual harassment. Workers in small/micro organisations, and those working from home only were the groups most likely to experience physical bullying/harassment.

⁴ Fisher's exact statistical test was used instead of chi-square test, when the count of participants within a group is less than 5 (for instance, the count of participants working 'from Home only' reported verbal harassment is 3).

Table 6. Comparisons of exposure to various types of bullying/harassment by some demographic and employment characteristics.

	Verbal			Psychological			Discrimination			Sexual			Physical		
	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]
Gender															
Male	156	25.6		134	22.0		62	10.2		37	6.1		37	6.1	
Female	239	28.3	.251	237	28.0	.009	115	13.6	.047	90	10.7	.002	48	5.7	.757
Age groups															
Young (<25)	26	28.6		19	20.9		13	14.3		14	15.4		4	4.4	
Middle (25-44)	225	24.8		230	25.4		112	12.3		90	9.9		63	6.9	
Older (45+)	155	32.0	.017	132	27.2	.417	58	12.0	.825	28	5.8	.003	19	3.9	.059
Key industries															
Construction	49	33.3		37	25.2		13	8.8		14	9.5		4	2.7	
Health care	92	36.4		85	33.6		37	14.6		21	8.3		21	8.3	
Manufacturing	18	17.8		23	22.8		13	12.9		11	10.9		10	9.9	
Education	36	29.3		35	28.5		12	9.8		10	8.1		7	5.7	
Transport	43	40.2		27	25.2		20	18.7		11	10.3		5	4.7	
Agriculture	11	30.6	.009	6	16.7	.125	3	8.3	.166	5	13.9	.875	3	8.3	.178
Business size															
Small/micro	59	19.0		54	17.4		25	8.0		38	12.2		28	9.0	
Medium	100	25.3		90	22.7		41	10.4		27	6.8		22	5.6	
Large	226	33.2	.000	215	31.6	.000	105	15.4	.002	59	8.7	.041	31	4.6	.020
Work role															
Worker	263	30.2		236	27.1		117	13.4		72	8.3		40	4.6	
Manager/ Executive	92	22.8		94	23.3		43	10.7		38	9.4		33	8.2	
HSR	10	18.9	.009	12	22.6	.317	4	7.5	.212	7	13.2	.407	5	9.4	.021
Work structure															
Home only	3	5.4		10	17.9		5	8.9		7	12.5		11	19.6	
Office only	309	31.9		262	27.1		133	13.7		86	8.9		51	5.3	
Hybrid	78	18.6	.000	101	24.0	.190	39	9.3	.050	33	7.9	.489	21	5.0	.000

Note: ^ p-value for chi-square/fisher's exact tests for statistically significant difference in the distribution by sub-groups.

Reporting of sexual harassment

Table 7 shows the frequencies regarding reporting of bullying and/or harassment at work. Among 125 participants who had experienced sexual harassment and responded to additional questions about such incident reporting, 38.4% would systematically report the incident, and nearly 2 out of 10 (19.2%) would never do so. Among those who had experienced sexual harassment but choose not to report it, the most common reason was of 'being afraid that the report would not be believed or taken seriously' (28.6%), followed by 'being afraid that their relationships at work would be negatively affected' (26.0%) and 'being afraid that their career negatively impacted' (22.1%).

Among those who had reported the incident, nearly half reported it to their manager or supervisor, and a slightly smaller proportion (47.5%) reported it to a co-worker or peer at their same level. Interestingly, less than 1 out of 10 (8.9%) reported it to an external agency such as Fair work commission or Safework. Regarding the outcome of the reporting, 39.6% of those who had reported sexual harassment felt that 'there were no changes at all made in their organisation'. Few of those who had reported sexual harassment experienced real changes made in their organisation, with 5.9% reporting 'changes in existing policies on bullying/harassment' and 4% reporting changes in 'implementation of training or education'. These actual outcomes were by far much smaller than the desired outcome expressed by participants, with 48.5% expecting 'changes in existing policies' and 28.7% expecting 'changes in training or education'.

Table 7. Reporting of sexual harassment.

	n	%
How often sexual harassment was reported (N = 125)		
Always	48	38.4
Sometimes	53	42.4
Never	24	19.2
Who did you report the incident(s) to? (N = 101, always/sometimes)		
Your manager or supervisor	50	49.5
A co-worker or peer at your same level	48	47.5
A family member or friend	30	29.7
Human resource department	22	21.8
An External agency (e.g. Fair Work Commission, Safework NSW).	9	8.9
What was the outcome of your report(s)? (N = 101, always/sometimes)		
There were no changes at the organisation following your report	40	39.6
Your employer advised the organisation that such conduct had occurred, and it was unacceptable	22	21.8
Your employer apologised for failing to prevent the bullying/harassment	16	15.8
You were transferred to another team or department within the workplace	7	6.9
Your employer developed or changed the existing policy on bullying/harassment - (e.g. complaint procedure)	6	5.9
Your employer implemented training or education	4	4.0
What would you have liked to see happen? (N = 101, always/sometimes)		
Your employer develops or changes the existing policy on bullying/harassment - (e.g. complaint procedure)	49	48.5
Your employer advises the organisation that such conduct had occurred, and it was unacceptable	44	43.6
Your employer apologises for failing to prevent the bullying/harassment	34	33.7
Your employer implements training or education	29	28.7
What were the reasons that you didn't report? (N = 77, never/sometimes)		
I was afraid that my report would not be believed or taken seriously	22	28.6
I was afraid that my relationships at work would be negatively affected	20	26.0
I was afraid that my career negatively impacted.	17	22.1
It wasn't serious enough	14	18.2
I was embarrassed	10	13.0

Exposure to psychosocial hazards

The validated tool developed by Buttler et al. 2011 was used to identify participants exposure to one or more 'psychosocial job quality (PJQ) adversities' including high job demand, low job control, low job security and low effort-reward fairness. Table 8 shows the frequencies of participants as a function of their number of PJQ adversities. The proportion with no adversity was significantly higher compared that reported in the previous edition (42.6% vs. 31.7%, chi-square test p-value < 0.001). The proportion of participants with 3 or more PJQ adversities, which identifies participants 'at-risk' of psychosocial harm, significantly decreased in comparison to the previous edition (7.5% vs 16.3%).

Table 8. Reporting of psychosocial hazards.

	This Survey		Previous Survey	
	n	%	n	%
Number of PJQ adversity				
0	636	42.6	318	31.7
1	502	33.6	327	32.6
2	244	16.3	194	19.4
3	101	6.8	149	14.9
4	10	0.7	14	1.4
Type of PJQ adversity				
High job demand	345	23.1	285	28.4
Low job control	329	22.0	274	27.2
Low job security	341	22.8	309	30.7
Low effort-reward fairness	318	21.3	352	35.1

Table 9 shows the frequencies of exposure to various job quality adversities as a function of selected demographic and employment characteristics. Chi-square or Fisher's exact⁵ statistical analyses revealed that female workers were more likely to experience low job control and low job effort-reward fairness. Young workers were found more likely to experience low job security in comparison to older workers. Health care workers were found more likely to experience high job demand, low job control and low effort-reward fairness. In terms of working structure, those working in the office/work site(s) only were found more likely to experience low job control and low effort-reward fairness, whereas those working from home only were found more likely to experience low job security.

⁵ Fisher's exact statistical test was used instead of chi-square test, when the count of participants within a group is less than 5 (for instance, the count of participants in Agriculture sector reported high job demand is 2).

Table 9. Frequencies of exposure to various job quality adversities by demographic and employment characteristics.

	High job demand			Low job control			Low job security			Low job fairness		
	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]
Gender												
Male	135	22.1		115	18.9		140	23.0		109	17.9	
Female	199	23.6	.525	203	24.0	.019	185	21.9	.633	203	24.0	.005
Age groups												
Young (<25)	12	13.2		27	29.7		39	42.9		21	23.1	
Middle (25-44)	219	24.1		195	21.5		182	20.1		179	19.7	
Older (45+)	114	23.5	.061	104	21.4	.188	114	23.5	.000	117	24.1	.150
Key industries												
Construction	39	26.5		25	17.0		37	25.2		16	10.9	
Health care	76	30.0		89	35.2		46	18.2		85	33.6	
Manufacturing	17	16.8		16	15.8		24	23.8		15	14.9	
Education	37	30.1		23	18.7		18	14.6		39	31.7	
Transport	21	19.6		45	42.1		30	28.0		29	27.1	
Agriculture	2	5.6	.003	7	19.4	.000	12	33.3	.033	4	11.1	.000
Business size												
Small/micro	52	16.7		66	21.2		103	33.1		58	18.6	
Medium	78	19.7		85	21.5		103	26.0		69	17.4	
Large	191	28.0	.000	176	25.8	.144	98	14.4	.000	175	25.7	.002
Work role												
Worker	204	23.4		263	30.2		203	23.3		222	25.5	
Manager/ Executive	95	23.6		53	13.2		82	20.3		68	16.9	
HSR	12	22.6	.988	4	7.5	.000	7	13.2	.145	5	9.4	.000
Work structure												
Home only	8	14.3		4	7.1		20	35.7		6	10.7	
Office only	238	24.6		271	28.0		233	24.1		237	24.5	
Hybrid	91	21.7	.131	39	9.3	.000	68	16.2	.000	58	13.8	.000

Note: [^] p-value for chi-square/fisher's exact tests for statistically significant difference in the distribution by sub-groups.

Burnout

Over two thirds of participants reported feeling drained by their work, which is similar to the proportion reported in the previous edition (chi-square test p-value = 0.09).

Table 10. Responses to statements about burnout.

	This Survey		Previous Survey	
	Disagree	Agree	Disagree	Agree
I feel drained by my work.	18%	68%	23%	64%
I worry about work when I am not working.	29%	59%	23%	63%
I find it hard to disconnect from work.	30%	56%	21%	62%

The majority of participants agreed that 'they worry about work when not working' and that 'they find it hard to disconnect from work' (59% and 56%, respectively). These were both

statistically significantly smaller than those reported in the previous edition (chi-square test p-value = 0.01 and < 0.001, respectively).

Participants' burnout index ranging from 0 (no burnout) to 100 (complete burnout) was estimated as a function of their level of agreement to the 3 statements in Table 10. The average Burnout index was 63.43, which is not statistically different from that reported in the previous edition (average of 64.02, t-test p-value = 0.56). Burnout index scores were examined as a function of selected demographic and employment characteristics (Table 10). ANOVA and t-tests for statistical difference of the burnout index scores (followed by post hoc Bonferroni comparisons when appropriate) revealed significant differences in the level of burnout experienced by workers as a function of their sector of employment, and the business size of their employer. Workers in the Education sector felt significantly more burnout than workers in the Manufacturing sector, Managers/Executives felt significantly more burnout than those being at worker level or in the role as HSR, workers in large organisations felt significantly more burnout than workers in small and micro businesses, worker working in hybrid structure also expressed significantly higher level of burnout than those working in the office/work site(s) only.

Table 11. Mean burnout index score for all participants and sub-groups by demographic and employment characteristics.

	Burnout index mean	p-value*
All participants	63.43	
Gender		
Male	62.19	
Female	64.22	.131
Age groups		
Young (<25)	61.20	
Middle (25-44)	63.85	
Older (45+)	63.05	.587
Key industries		
Construction	63.04	
Health care	64.56	
Manufacturing	57.92	
Education	68.25	
Transport	60.46	
Agriculture	60.03	.028
Business size		
Small/micro	60.08	
Medium	62.00	
Large	65.13	.010
Work role		
Worker	61.08	
Manager/Executive	68.49	
HSR	59.43	.000
Work structure		
Home only	66.67	
Office only	62.41	
Hybrid	66.09	.029

Note: * p-value for t-tests/ANOVA tests for statistically significant difference in the mean index score by sub-groups.

WHS Awareness and Empowerment

Results indicate that participants felt generally more aware of their WHS rights and responsibilities, and more empowered to participate in WHS conversations in the workplace, in comparison to the previous edition. Nine out of 10 participants agreed that they ‘know how to perform their job in a safe manner’, and 9 out of 10 participants agreed that they ‘know what the necessary precautions are that [they] should take while doing their job’ (Table 12).

Table 12. Responses to statements about WHS awareness.

	This Survey		Previous Survey	
	Disagree	Agree	Disagree	Agree
I am clear about my rights and responsibilities in relation to workplace health and safety.	7%	84%	12%	74%
I am clear about my employer's rights and responsibilities in relation to workplace health and safety.	8%	82%	12%	75%
I know how to perform my job in a safe manner.	2%	93%	8%	79%
If I became aware of a health or safety hazard at my workplace, I know who (at my workplace) I would report it to.	7%	87%	11%	76%
I have the knowledge to assist in responding to any health and safety concerns at my workplace.	7%	82%	11%	76%
I know what the necessary precautions are that I should take while doing my job.	2%	93%	6%	80%

Participants' awareness in WHS was measured by their level of agreement with statements about WHS awareness. With a range between 0 (no awareness) and 100 (complete awareness), participants reported a significantly higher awareness index score (80.62) compared to that reported in the previous edition (76.35) (t-test p-value < 0.001). ANOVA and t-tests for statistical difference of the WHS awareness index scores (followed by post hoc Bonferroni comparisons when appropriate) revealed that older workers felt higher levels of awareness than expressed by those in the younger age groups (middle and young), those working in large organisations also felt higher levels of awareness than those working in medium, and in small and micro businesses, and finally, HRS felt higher levels of awareness than managers/executive and those at worker level, those working in office/work site(s) only felt higher levels of awareness than those working from home only (Table 13).

Table 13. Mean WHS awareness index score for all participants and sub-groups by some demographic and employment characteristics.

	Awareness index mean	p-value
All participants	80.62	
Gender		
Male	81.70	
Female	79.99	.048
Age groups		
Young (<25)	79.30	
Middle (25-44)	79.11	
Older (45+)	84.00	.000
Key industries		
Construction	83.93	
Health care	81.65	
Manufacturing	80.92	
Education	81.25	
Transport	81.27	
Agriculture	76.92	.290
Business size		
Small/micro	79.21	
Medium	79.35	
Large	82.16	.005
Work role		
Worker	79.51	
Manager/Executive	81.57	
HSR	87.74	.000
Work structure		
Home only	76.01	
Office only	81.48	
Hybrid	80.04	.023

Note: * p-value for t-tests/ANOVA tests for statistically significant difference in the mean index score by sub-groups.

In terms of the empowerment to participate in WHS conversations in their workplace, 9 out of 10 participants agreed that ‘they would point out to management if they notice a workplace hazard’. Overall, there were increases in the proportions of participants who agreed with nearly all empowerment-related statements compared to those reported in the previous edition. The statement with a decrease in the proportion would in fact require ‘disagree’ or ‘strongly disagree’ to maintain the same meaning as ‘agree’ or ‘strongly agree’ in other statements (Table 14). In other words, these results indicate improved empowerment to participate in WHS in the Spring edition.

Table 14. Responses to statements about WHS empowerment.

	This Survey		Previous Survey	
	Disagree	Agree	Disagree	Agree
I feel free to voice concerns or make suggestions about workplace health and safety at my job.	17%	70%	20%	64%
If I notice a workplace hazard, I would point it out to management.	4%	90%	6%	80%
I know that I can stop work if I think something is unsafe and management will not give me a hard time.	17%	69%	22%	60%
I have enough time to complete my work tasks safely.	19%	63%	24%	55%
I have a good working relationship with my manager.	11%	73%	16%	63%
If my work environment was UNSAFE, I WOULD NOT say anything, and hope that the situation eventually improves.	68%	20%	58%	25%

Participants' empowerment index ranging from 0 (no empowerment) to 100 (complete empowerment) was estimated as a function of their level of agreement to the empowerment-related statements in table 15. Results show higher empowerment index score compared to that reported in the previous edition (average of 71.50 vs. 67.24, respectively, t-test p-value < 0.001). ANOVA and t-tests for statistical difference in the WHS empowerment index score (followed by post hoc Bonferroni comparisons when appropriate) indicated that male workers felt more empowered in WHS conversations than females, workers in Construction and Manufacturing were more empowered than those in Health care sector, and HRSs and managers/executives felt more empowered in WHS conversations than those at worker level (Table 15).

Table 15. Mean WHS empowerment index score for all participants and sub-groups by some demographic and employment characteristics.

	Empowerment index	
	mean	p-value
All participants	71.50	
Gender		
Male	72.83	
Female	70.80	.039
Age groups		
Young (<25)	70.06	
Middle (25-44)	71.17	
Older (45+)	72.76	.300
Key industries		
Construction	74.48	
Health care	69.64	
Manufacturing	73.00	
Education	73.22	
Transport	69.92	
Agriculture	69.32	.008
Business size		
Small/micro	71.46	
Medium	72.07	
Large	71.12	.720
Work role		
Worker	69.78	
Manager/Executive	73.51	
HSR	77.69	.000
Work structure		
Home only	70.55	
Office only	71.33	
Hybrid	72.73	.069

Note: * p-value for t-tests/ANOVA tests for statistically significant difference in the mean index score by sub-groups.

Workplace WHS profile

System and Commitment to WHS

Most participants (7 out of 10) agreed that in their workplace, ‘systems are in-place to identify, prevent and deal with hazard at work’, and most (7 out of 10) agreed that ‘Communication about workplace health and safety procedures is done in a way that they can understand’. Compared to the previous edition, there were consistent increases in the proportions of participants ‘agreeing’ with statements about workplace’s WHS system (Table 16).

Table 16. Responses to statements about workplace’s WHS system.

	This Survey		Previous Survey	
	Disagree	Agree	Disagree	Agree
Everyone receives the necessary health and safety training when starting a job, changing jobs, or using new techniques.	23%	61%	27%	53%
There is regular communication between workers and management about health and safety issues.	22%	61%	26%	55%
Systems are in-place to identify, prevent and deal with hazards at work.	14%	70%	18%	63%
There is an active and effective health and safety committee, and/or health and safety representative.	23%	57%	25%	53%
Incidents and accidents are investigated quickly in order to improve workplace health and safety.	17%	63%	24%	53%
Communication about workplace health and safety procedures is done in a way that I can understand.	12%	71%	19%	60%
Workplace health and safety is considered to be at least as important as production and quality in the way work is done.	18%	67%	22%	59%

The average index score for WHS System was 65.91, which is statistically significantly higher than that reported in the previous edition (62.29, t-test p-value < 0.001), indicating that participants felt more confident about the WHS system in place in their workplace. ANOVA and t-tests for statistical difference in the WHS System index score (with post hoc Bonferroni comparisons where relevant) revealed that across sub-groups, male workers felt more confident than female workers about their workplace WHS system, HSRs and managers/executives felt more confident than those at worker level about their workplace WHS system, as well as workers benefiting from hybrid working arrangements in comparison to those working from home only (Table 17).

Table 17. Mean WHS system index score for all participants and sub-groups by some demographic and employment characteristics.

	System index mean	p-value
All participants	65.91	
Gender		
Male	68.41	
Female	64.30	.001
Age groups		
Young (<25)	67.02	
Middle (25-44)	66.39	
Older (45+)	65.05	.530
Key industries		
Construction	67.98	
Health care	63.25	
Manufacturing	71.35	
Education	65.08	
Transport	65.11	
Agriculture	66.49	.059
Business size		
Small/micro	65.59	
Medium	65.63	
Large	66.11	.920
Work role		
Worker	63.03	
Manager/Executive	69.06	
HSR	75.32	.000
Work structure		
Home only	60.55	
Office only	65.68	
Hybrid	68.09	.032

Note: * p-value for t-tests/ANOVA tests for statistically significant difference in the mean index score by sub-groups.

In regard to workplace's commitment to WHS, over 6 out of 10 participants agreed that 'their supervisors are supported to make decisions to aid the physical and psychological safety of all workers'. This is an increase of nearly 10% compared to the previous edition (from 53%). Results showed an increase of the proportions of participants agreeing to 5 out of 6 statements about workplace's commitment to WHS. The only exception is the statement that 'there are systems in-place to proactively manage hazards that could affect my mental health' (51% vs. 53% in the previous edition) (Table 18).

Table 18. Responses to statements about workplace's commitment to WHS.

	This Survey		Previous Survey	
	Disagree	Agree	Disagree	Agree
Supervisors are supported to make decisions to aid the physical and psychological safety of all workers.	20%	62%	24%	53%
Leaders demonstrate a commitment to healthy work creating a strong safety culture.	21%	60%	24%	53%
Systems are in-place to proactively manage hazards that could affect my mental health.	29%	51%	24%	53%
WHS is a priority when new technology is introduced, including assessing and managing risks; consulting and communicating with workers; and conducting training in the safe use.	19%	59%	26%	48%
I have confidence that my privacy and confidentiality is protected when new technology is introduced.	18%	59%	24%	50%
Systems are in place to manage WHS in support of flexible work practices and flexible work environments.	21%	58%	31%	45%

Participants' WHS Commitment index score was 62.46, statistically significantly higher than that reported in the previous edition (58.07, t-test p-value < 0.001), indicating a better perception of commitment to WHS in the workplace. ANOVA and t-tests for statistical difference in the WHS Commitment index score show that male workers felt more confident than female workers about their workplace's commitment to WHS, similar to young workers in comparison to older workers, Construction and Manufacturing workers in comparison to Health care workers. Workers from small/micro and medium businesses felt also more confident than workers from large businesses about their workplace's commitment to WHS. HSRs and managers/executives had higher levels of confidence in their workplace's commitment to WHS than those at worker level (Table 19).

Table 19. Mean Commitment to WHS index score for all participants and sub-groups by some demographic and employment characteristics.

	Commitment index mean	p-value
All participants	62.46	
Gender		
Male	65.07	
Female	60.85	.001
Age groups		
Young (<25)	66.56	
Middle (25-44)	63.77	
Older (45+)	59.54	.002
Key industries		
Construction	65.60	
Health care	58.33	
Manufacturing	67.97	
Education	60.83	
Transport	59.25	
Agriculture	62.27	.007
Business size		
Small/micro	64.92	
Medium	63.98	
Large	59.90	.002
Work role		
Worker	59.04	
Manager/Executive	66.52	
HSR	70.72	.000
Work structure		
Home only	60.31	
Office only	61.47	
Hybrid	65.86	.006

Note: * p-value for t-tests/ANOVA tests for statistically significant difference in the mean index score by sub-groups.

Barriers, enablers and drivers to good WHS practice

The most common barriers to good WHS selected by participants were ‘Lack of time or resources’ (45%), ‘Prioritising other items over WHS’ (38%) and ‘Cost implication’ (31%). These top three barriers were consistent across key industries and business sizes (Table 20).

Regarding enablers of good WHS, ‘Training and Education’ (48%), ‘Strong leadership and commitment’ (45%), and ‘Active risk assessment and management’ (42%) were selected in participants’ top three. Table 21 shows some variations as a function of participants’ industry and business size. Specifically, ‘Communication & consultation with all workers’ was selected as the top enabler by workers in Health care (53%), and selected in the top three enablers of workers in small and micro businesses (40.5%).

Regarding drivers of good WHS, 'More valued by workers', 'Impact on business' reputation' and 'Thought of someone might get seriously hurt' were generally selected as the top three drivers (38.0%, 32.8% and 31.6%, respectively). Table 22 shows some variations as a function of participants' industry and business size. Notably, 'More financially rewarding', which did figure in the overall top three drivers in the previous edition, was selected in the top three drivers of workers in small and micro businesses, workers in Construction, and workers in Agriculture. Workers in Agriculture also selected 'Simpler to understand' as a driver of good WHS in their sector.

Table 20. Barriers to good WHS reported by participants in some key industries and business sizes.

	Lack of time/resources			Prioritising other items over WHS			Cost implication			Limited understanding			No expertise			Limited knowledge			Too complex		
	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]
All participants	673	45.1		567	38.0		460	30.8		397	26.6		347	23.2		3	22.8		205	13.7	
Key industries																					
Construction	89	60.5		61	41.5		62	42.2		43	29.3		39	26.5		3	21.8		18	12.2	
Health care	135	53.4		100	39.5		69	27.3		57	22.5		56	22.1		3	20.9		20	7.9	
Manufacturing	40	39.6		33	32.7		39	38.6		28	27.7		33	32.7		2	20.7		19	18.8	
Education	50	40.7		42	34.1		33	26.4		27	22.0		28	23.3		5	4.3		13	10.6	
Transport	54	50.5		49	45.8		47	43.5		27	25.2		25	23.4		5	4.7		17	15.9	
Agriculture	14	38.9	.003	13	36.1	.354	17	47.2	.001	10	27.8	.639	4	11.1	.129	5	13.9	.206	8	22.8	.021
Business size																					
Small/micro	119	38.3		84	27.0		100	32.2		83	26.7		84	27.0		6	20.9		53	17.0	
Medium	164	41.4		150	37.9		112	28.3		111	28.0		102	25.5		9	23.0		55	13.3	
Large	354	52.0	.000	304	44.6	.000	211	31.4	.498	171	25.1	.567	124	18.0	.01	16	23.6	.632	12	17.8	.199

Note: ^ p-value for chi-square/fisher's exact tests for statistically significant difference in the distribution by sub-groups.

Table 21. Enablers to good WHS reported by participants in some key industries and business sizes.

	Training and education			Strong leadership			Active risk assessment & management			Communication & consultation with all workers			Adequate resources			Good reporting systems			Investigation and mitigation action post incident			Safe business is good business		
	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]
All participants	723	48.4		677	45.3		660	44.2		630	42.2		593	39.7		570	38.2		484	32.4		326	21.8	
Key industries																								
Construction	74	50.3		71	48.3		75	51.0		74	50.3		69	46.9		57	38.8		53	36.1		41	27.9	
Health care	134	53.0		103	40.7		104	41.1		96	37.9		96	37.9		107	42.3		92	36.4		42	16.6	
Manufacturing	45	44.6		40	39.6		48	47.5		51	50.5		47	46.5		42	41.6		37	36.6		30	29.7	
Education	61	49.6		66	53.7		55	44.7		54	43.7		49	39.8		47	38.2		36	29.3		20	16.3	
Transport	53	49.5		41	38.7		47	43.8		48	44.8		38	35.9		46	43.0		53	49.5		28	26.2	
Agriculture	12	33.3	.30	14	38.9	.09	13	36.1	.401	11	30.6	.06	16	44.9	.30	6	16.7	.091	5	13.9	.002	9	25.0	.014
Business size																								
Small/micro	123	39.5		130	41.8		121	38.9		126	40.5		114	36.7		91	29.3		60	19.3		65	20.9	
Medium	193	48.7		183	46.2		180	45.5		178	44.9		159	40.2		158	39.9		130	32.8		83	21.0	
Large	364	53.5	.00	327	48.0	.190	319	46.8	.061	293	43.0	.49	279	41.0	.42	292	42.9	.00	273	40.1	.000	0	22.0	.88

Note: ^ p-value for chi-square/fisher's exact tests for statistically significant difference in the distribution by sub-groups.

Table 22. Drivers to good WHS reported by participants in some key industries and business sizes.

	More valued by workers			Impact on the business' reputation			Thought of someone might get seriously hurt			More financially rewarding			Simpler to understand			More valued by customers/ investors			Thought of at risk of getting caught by regulators		
	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]	n	%	p [^]
All participants	568	38.0		489	32.8		472	31.6		444	29.7		369	24.7		343	23.0		310	20.8	
Key industries																					
Construction	74	50.3		49	33.3		45	30.6		57	38.8		32	21.8		59	40.1		33	22.4	
Health care	103	40.7		73	28.9		76	30.0		51	20.2		46	18.2		35	13.8		50	19.8	
Manufacturing	38	37.6		33	32.7		34	33.7		33	32.7		30	29.7		30	29.7		19	18.8	
Education	42	34.1		36	29.3		41	33.3		30	24.4		25	20.3		20	16.3		21	17.1	
Transport	54	50.5		42	39.3		41	38.3		40	37.4		31	29.0		30	28.0		32	29.9	
Agriculture	14	38.9	.042	10	27.8	.469	10	27.8	.694	13	36.1	.000	11	30.6	.079	5	13.9	.000	9	25.0	.209
Business size																					
Small/micro	96	30.9		80	25.7		77	24.8		93	29.9		71	22.8		62	19.9		45	14.5	
Medium	152	38.4		125	31.6		135	34.1		118	29.8		98	24.7		109	27.5		74	18.7	
Large	289	42.4	.002	247	36.3	.004	224	32.9	.015	187	27.5	.617	167	24.5	.810	141	20.7	.017	165	24.2	.001

Note: [^] p-value for chi-square/fisher's exact tests for statistically significant difference in the distribution by sub-groups.

Future of work

New or emerging WHS issues in the workplace

One out of five participants reported having experienced, or observed, a new or emerging WHS issue related to behaviour, attitudes or practices in the workplace, over the last six months (22%).

Table 23. New or emerging WHS issues in the workplace.

	n	%
Issues from new or emerging behaviours, attitudes, or practices (either yours or other people in your workplace)	32	22
	9	%
Issues from new or emerging ways of working or types of work	17	12
	3	%
Issues from new or emerging technologies or workplace innovations	14	10
	7	%
Other new or emerging issues	64	4%
	98	66
None of the above	4	%

Most commonly reported issues from new or emerging behaviours, attitudes, or practices (either yours or other people in your workplace)

- Lack of support and commitment from management to WHS (n= 66)

Large number of participants expressed their concern regarding management's lack of support and commitment to WHS. These were reported in different shapes or forms, from de-prioritisation of WHS taken over by profit or cost savings, to the extreme that WHS issues were created by the management themselves, such as increased stress and tension among workers, act of bullying and abuse.

“Change in leadership which values profit over safety”

“New management team that prefers to work within a budget rather than spending money fixing issues”

“Executives allow and conduct in acts of bullying, intimidation, verbal abuse”

“More people getting bullied from the boss if you don't work faster and females cope it the most”

“Increased stress and tension in the workplace leading to changes in manager's behaviour that encroach on bullying/ psychological hazards to others”

- Increasing workloads, high expectations, lack of resources, lack of role clarity, and/or procedure to reporting WHS issues (n=62).

Participants also reported their concern around increasing workloads along with high expectation without relevant resources and support, which would consequently lead to serious WHS issues in the workplace. This is particularly true in the context of tight labour market and increasing costs of labour hire.

“People are burnt out. Workloads and expectations are increasing”

“Being made to work unsafe practices due to time constraint”

“Shrinking regional workforce meaning acceptance of short staffing and it becoming the new normal”

“Everyone is burnt out and stressed because we don’t have enough resources. Work is getting busier but staffing levels haven’t accommodated for that”

“Reduction in the workforce leading to people cutting corners to increase productivity to try and maintain contracts”

“A consistent theme of ignorance or purposeful behaviour that ignores issues raised. Lack of role clarity and job expectations with little communication from upper management”

“Push to get the job done and not consider fatigue”

- Worker’s negative attitude toward WHS, lack of training, lack of responsibility to WHS (n=61).

Tight labour market increases the need to hire young or inexperienced workers. These were also the ones who often lack of training and/or lack of experience in the area of WHS. Consequently, this would associate with inappropriate attitude toward safety, including some of the expressions reported by participants below:

“Younger workers with bad attitudes”

“Attitude to safety is not taken seriously, they just try to get the job done”

“Employees do not have a positive attitude towards work”

“Workers don’t understand they are responsible for their and everyone else’s safety”

“New staff who are not trained, are recent migrants to Australia who lack a standard level of English, who aren’t interested in anything except to do the job quicker than others, to make good impression as to get mates a job too”

“New hires don’t like change and overseas workers who don’t want to follow; when rules where they come from there is none”

“Complacency around hazards, such as not wearing PPE; ignoring barricading, cutting corners, no repercussions and just focusing on production”

“Not everyone has the proper training which is required to follow processes”

Most commonly reported issues from new or emerging ways of working or types of work.

- Participants expressed concerns related to flexible work arrangement, including working from home, from remote locations, across culture and geographies, and/or hybrid work (n=26).

Working flexibly, including working from home, working from remote locations or hybrid work with a mix of office/work site(s) and home/remote location, has become a new normal way of working, facilitated by the COVID-19 pandemic. However, inconsistent policies around flexible working across workplaces, such as the number of days that workers are required to be in the office, or specific days that workers are of the week required to be in the office, create uncertainty.

“Working from home means that there is no collegiality, and everyone is just in their own bubble. It's quite dehumanizing and management make no attempt to do anything about it”

“With the popularity of telecommuting, employees face problems such as lack of proper workstation settings, lack of human interaction, and lack of physical activity”

“Loneliness, disconnection from workplace due to working from home”

“Flexible working hours result in employees working long, continuous hours and lack of rest and recovery time, potentially increasing work stress and mental health issues”

“Work from home flexibility means that employers have less visibility over WHS aspects at employee's choice of work space”

“New issues arising from the widespread adoption of remote work, such as managing team collaboration and maintaining work-life balance; emerging with increased work from home/ changed start and finish times; reduced leadership support with work from home”

- The emergence of automation in the workplace, and gig economy leads to participants concerns about their job security as well as safety (n=43).

“Additional services are added to existing delivery service by gig platforms using e-bike. However, there are items that are too big/heavy for bicycle, which creates safety issue for riders”

“The rapid development of new technologies can lead to workers’ skills becoming obsolete, requiring continuous learning and adaptation to new skills”

“With the development of automation technology, many traditional jobs may be replaced by robots or automated equipment, resulting in a large number of people unemployed”

“The introduction of new technologies may lead to the automatic replacement of certain positions, resulting in the reduction of related jobs and the unemployment of employees”

Most commonly reported issues from new or emerging technologies or workplace innovations.

- WHS concerns that were reported by participants were job security (job losses), privacy and security issues, mental health problem, increased working pressure; lack of training, confusion and even issues that are yet to be realised in the future.

“AI and increased use of robotics - both causing stress for workers fearing loss of job as well as safety issues associated with people interaction with robotics - lack of separation from moving parts”

“Transition of technologies has led to many privacy and confidentiality concerns, particularly with people maintaining access to things they should no longer be able to access”

“New technologies also bring personal data and privacy challenges, such as the use of monitoring technology in remote work”

“In the field of artificial intelligence and machine learning, algorithmic biases lead to unfair decisions, raising questions of ethics and social justice”

“The introduction of new technologies has led to the original working mode becoming less fluid, and our original working mode has become cumbersome”

“Certain new technologies can have negative effects on employee health and ergonomics, such as eye strain and posture problems caused by prolonged use of electronic devices”

“With the increasing use of technology, such as computers and mobile devices, people are experiencing musculoskeletal disorders like carpal tunnel syndrome, neck and back pain, and eye strain due to poor ergonomics”

“Changes in technology systems have increased stress in some business areas”

Emerging WHS preventative measures and solutions

About 1 out five participants reported having noticed or experienced at least one new/emerging measure or solution to improve WHS in the last 6 months.

Table 24. Emerging WHS preventative measures and solutions.

	n	%
New WHS guides, resources, or materials	112	8%
New technology that has the potential to prevent harm	99	7%
New legislation or codes of practices in Australia or internationally	97	6%
Other new solutions that have the potential to prevent harm	89	6%
None of the above	1198	80%

New WHS guides, resources and materials

Most participants reported new guides, resources and materials related to general WHS that they came across on regulator websites, the Centre's website and/or WHS team within their organisations. There were also a number of participants who reported new guides, and resources related to specific issues such as psychosocial hazards and mental health, working from home or remote location, specific WHS needs for disability/aged care workers.

New legislation or codes of practices in Australia or internationally

The most commonly reported new legislation or code of practice was the one on managing psychosocial hazard and mental health in the workplace (n=40). There were also some (n = 7) reference to code of practice related to hazardous chemicals including silica (n = 6) and welding fumes (n=1).

New technology that has the potential to prevent harm

- Artificial intelligence was one of most common new technology reported by participants to promote WHS. For instance, it was described that the advanced AI algorithms can be used to analyse patterns and detect potential harm in real-time.
- Another technology that was mentioned is data analytics and predictive models, by using big data analytics and machine learning algorithms, it is possible to analyse historical data and predict potential security risks. This helps to detect and prevent accidents early and take appropriate measures to protect the safety of employees.
- There was also mentioning of the use of electrics and robotics where human would have once had to enter, to keep operators away from hazardous sites and remotely control machinery operations.

- Smart safety nets, with sensors and automated controls, detect and respond in real time to fall risks at high altitudes to protect workers from falling injuries.
- Virtual reality (VR) and augmented reality (AR) technologies can provide immersive training and simulation environments that enable workers to practice and learn in a safe virtual environment to reduce the occurrence of accidents and injuries

Discussion

This report provides the latest insights on from online survey of Australian workers on a number of WHS leading indicators, covering physical to psychosocial hazards at worker level and their perception of their workplace's WHS system and commitment to good WHS practice. A total of 1,493 workers participated in this 2023 Spring Edition of the Survey, an increase of nearly 50% from our previous edition in Autumn 2023.

Harms to workers

Over 84% of participants indicated being exposed to at least one of the nine hazards listed in the validated OHS Vulnerability measure on daily or weekly basis, an increase of approximately 20% in comparison to the previous edition in Autumn 2023 six months ago. 'Repetitive movement with hands or wrists (packing, sorting, assembling, cleaning, pulling, pushing, and typing for at least 3 hours during the day', 'Stand for more than 2 hours in a row', and 'Work in a bent, twisted, or awkward posture' were the hazards generating the most exposure, similar to the previous edition. Across these three hazards, male and young workers were the groups reporting the highest prevalence of daily/weekly exposure, reflecting the fact that they are more likely the ones doing physical jobs. In terms of industries, Construction and Health care workers were commonly those reporting very high level of exposures to the above hazards on a daily/weekly basis.

Results also showed a decrease of nearly 15% in the proportion of participants reporting having been bullied or harassed in the last 12 months. Similarly to the previous edition, verbal harassment was found the most common form of harassment, followed by psychological, the least common form being physical. Female workers appear to report higher prevalence of exposure than male counterparts across nearly all types of harassment. For sexual harassment, the prevalence of exposure in female workers was statistically significantly higher and nearly twice that of male workers. In addition, statistically significantly higher prevalence of exposure to sexual harassment was reported by young workers (compared to other age groups), and those working in small/micro businesses (compared to larger businesses).

In this 2023 Spring Edition of the Survey, we collected additional questions on the reporting of harassment. For sexual harassment, only 4 out of 10 participants responded that they always reported the incidence and nearly 2 out of 10 did not report the incidence at all. Among those who did report sexual harassment, they would do so preferably to their manager/supervisor, or their colleague at the same level. Very few (< 9%) reported to an external agency. This finding

supports the reality of seriously underreporting of sexual harassment in WHS regulators' statistics.

In contrast to the increase in the prevalence of workers' exposure to physical hazards, results showed a decrease in the prevalence of workers' exposure to psychosocial hazards, in comparison to the previous edition (including high job demand, low job control, low job quality and low effort-reward fairness). The apparent decrease of exposure to psychosocial hazards might be an early indicator of recent efforts from the work health and safety regulators in improving mental health at work. At the national level, the 2019-20 Federal Budget the Government allocated \$11.5 million over four years for the National Workplace Initiative (NWI) to provide a nationally consistent approach to workplace mental health. One of the objectives of the NWI is to strengthen programs and interventions for mentally healthy workplaces already underway in Australia⁶. In NSW, Safework has made available a wide variety of resources to support businesses from training, coaching, to management and assessment workplace mental health⁷. Worksafe Victoria, in their Workplace mental health strategy 2021-24, also set out objectives to focus on prevention, support and improvement in capabilities to create positive, mentally health workplaces⁸.

WHS practices in the workplace

Results showed consistent increases in the WHS awareness (participants are more aware of their WHS rights and responsibilities) and WHS empowerment (participants are more empowered to participate in WHS conversations) of the participants in comparison to the previous edition. Similarly participants felt more confident in their workplace's WHS system and commitment to WHS.

Barriers to good WHS practice

Lack of time or resources

Similar to the previous edition, the lack of time and resources is still the most common barrier selected by participants. The tight labour market following the disruption of migration in Australia during the pandemic years remained a sustained issue. Despite a slight improvement from 3.5% in June, the current unemployment rate in Australia is 3.7%, one of the lowest

⁶ <https://www.comcare.gov.au/safe-healthy-work/mentally-healthy-workplaces/mental-health-initiatives/build-resilience-in-the-workplace>

⁷ <https://www.nsw.gov.au/mental-health-at-work>

⁸ <https://www.worksafe.vic.gov.au/mental-health-strategy>

unemployment rates over the last 50 years⁹. The tight labour market leads to fierce competition and increasing costs to attract talents, and consequently contributes to the availability of resources that would have been devoted for WHS. The tight labour market also relates to the need to recruit younger and/or less experienced worker leading to the increase in the time for training and consequently decrease in time for other activities, which likely include WHS.

Prioritising other items over WHS

By law, a 'person conducting a business or undertaking' (PCBU) has the primary duty of care to ensure the health and safety of its workers and that other people are not put at risk from its work. In other words, WHS has to be prioritised. In reality, the opposite is often true, with prioritisation of cost savings and project delivery over WHS..

In the spotlight

Another call for prioritisation of WHS for Health care workers

Participants working in Health care sector were among those with highest prevalence of exposure to a wide range of workplace hazards. This sector was among the top 3 showing the highest prevalence of exposure to harassments (particularly verbal, psychological and discrimination), and of exposure to nearly all major psychosocial hazards (including high job demand, low job control and low effort-reward fairness). Health care sector participants were among the groups with the lowest scores of WHS awareness and of WHS empowerment, and showed the least confidence in their workplace's WHS systems and commitment to WHS.

These findings were no different from those in January, highlighting the need to prioritise health care workers across all domains of WHS. This is particularly important due to the fact that health care workers is currently accounted for the largest proportion in the entire Australian workforce. The Australian Intergenerational report 2023¹⁰ and NSW Intergenerational report 2021-22¹¹ both projected that people will live longer into the future and the proportion of older people in the population will keep increasing. Over the next 40

9 Australian Bureau of Statistics. Sep. 2023. Labour Force, Australia, detailed. <https://www.abs.gov.au/statistics/labour/employment-and-unemployment/labour-force-australia-detailed/sep-2023#unemployment>

10 Australian Government. (2023a). 2023 Intergenerational Report. <https://treasury.gov.au/publication/2023-intergenerational-report>

11 NSW Government. 2021. 2021-22 NSW Intergenerational report. https://www.treasury.nsw.gov.au/sites/default/files/2021-06/2021-22_nsw_intergenerational_report.pdf

years, the number of people aged 65 and over will more than double and the number aged 85 and over will more than triple. The demand for workers in Health care sector will increase enormously. Prioritising WHS for health care workers does not only ensure the work force to support the aging population healthy but also to attract future generations to join one of the most critical sectors in the economy.

At risk workers

Participants reported higher prevalence of exposure to sexual harassment were female workers, young workers and those working in small and micro businesses. While these were consistent with the findings reported in National inquiry into sexual harassment in Australian workplaces in 2020¹², these highlighted the fact that three years on, little has been done to address the issue.

Female workers also reported higher levels of exposure to most psychosocial hazards.

Workers working only from home reported significantly higher proportion of physical abuse/harassment than those working only in the office/work site(s) or those working in hybrid arrangements. This is the concern that was well documented in the literature for this group of workers due to the challenge in setting the boundaries between work and personal life, and higher risk of domestic violence as well as higher prevalence of alcohol consumption than other work arrangements (in office only, or hybrid)^{13, 14}.

¹² Australian Human Rights Commission. 2020. Respect@Work: National Inquiry into Sexual Harassment in Australian Workplaces.

¹³ Sarangi A., Kim D., & Rafael J. (2022). The mental health impact of work from home: a literature review. *The Southwest Respiratory and Critical Care Chronicles*, 10(45). <https://doi.org/10.12746/swrccc.v10i45.1085>

¹⁴ Ferrara, B., Pansini, M., De Vincenzi, C., Buonomo, I., & Benevene, P. (2022). Investigating the Role of Remote Working on Employees' Performance and Well-Being: An Evidence-Based Systematic Review. *Int J Environ Res Public Health*, 19(19). <https://doi.org/10.3390/ijerph191912373>

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- Ha Nguyen for drafting the report.

Appendices

Appendix A: Survey instrument – 2023 Spring Edition

Intent	Question	Response	Response type
Your job	Please tell us a little bit about your place of work, and your role in it. If you work in more than one workplace or have more than one role, pick the one where you spend most of your working hours.		
Q1. Role	Which of the following best describes your role in the workplace? If you currently work in more than one role, pick the one that you spend most of your working hours.	Worker Supervisor/Manager Executive/Board member Health and Safety Representative Sole trader/Freelancer/Consultant Volunteer Other, please specify [free input]	Mandatory Select one Text input option
Q2. Employment	Which of these categories best describes your current employment*? If you currently work in more than one type of employment, pick the one that you spend most of your working hours.	Permanent or ongoing Fixed-term Casual Labour hire Self-employed Contractor Gig worker Other, please specify [free input]	Optional Select one Text input option
Q3. State	In which state or territory do you work? If you currently work in more than one state or territory, pick the one where you spend most of your working hours.	New South Wales Victoria Australian Capital Territory Northern Territory Queensland South Australia Tasmania Western Australia	Mandatory Select one

Intent	Question	Response	Response type
		Outside Australia [closure statement, if only selection]	
Q4. Industry	<p>Which industry do you work in?</p> <p>If you currently work in more than one industry, pick the one that you spend most of your working hours.</p>	<p>Agriculture, Forestry and Fishing</p> <p>Mining</p> <p>Manufacturing</p> <p>Electricity, Gas, Water and Waste Services</p> <p>Construction</p> <p>Wholesale Trade</p> <p>Retail Trade</p> <p>Accommodation and Food Services</p> <p>Transport, Postal and Warehousing</p> <p>Information Media and Telecommunications</p> <p>Financial and Insurance Services</p> <p>Rental, Hiring and Real Estate Services</p> <p>Professional, Scientific and Technical Services</p> <p>Administrative and Support Services</p> <p>Public Administration and Safety</p> <p>Education and Training</p> <p>Health Care and Social Assistance</p> <p>Arts and Recreation Services</p> <p>Other, please specify [free input]</p>	Mandatory Select one
Q5. Business Size	<p>[skip if Demographic: role = sole trader]</p> <p>How many people work in your organisation?</p> <p>Please respond based on the organisation that you spend most of your working hours.</p>	<p>1-4 workers</p> <p>5-19 workers</p> <p>20-199 workers</p> <p>200 or more workers</p>	Mandatory Select one
Q6. Employer type	[skip if Demographic: role = sole trader]	<p>Private Company</p> <p>Public Company</p> <p>Government</p>	Mandatory Select one

Intent	Question	Response	Response type
	<p>Which of the following best describes the organisation you work for?</p> <p>Please respond based on the organisation that you spend most of your working hours.</p>	<p>Non-Government organisation/Not for Profit</p> <p>Other, please specify [free input]</p>	<p>Text input option</p>
<p>Q7. Working structure</p>	<p>What best describes where you work?</p> <p>Please respond based on the organisation that you spend most of your working hours.</p>	<p>I only work at my organisation's site/office</p> <p>I only work at home</p> <p>I work flexibly (e.g. home, office, field and/or work-sites)</p> <p>I work across multiple work sites</p> <p>I work in my vehicle</p> <p>Other, please specify [free input]</p>	<p>Mandatory</p> <p>Select one</p> <p>Text input option</p>
<p>Health and Safety in your workplace(s)</p>			
<p>Q8. Exposure to hazards</p>	<p>Workplace hazards: This part asks about the kinds of health and safety hazards you might be exposed to in your job.</p> <p>For each item below, please rate how often you do the stated task or are exposed to the stated condition.</p> <p>In your job, how often do you...?</p> <p>Manually lift, carry, or push items heavier than 20 kg at least 10 times a day.</p> <p>Do repetitive movements with your hands or wrists (packing, sorting, assembling, cleaning, pulling, pushing, and typing) for at least 3 hours during the day.</p>	<p>Never</p> <p>Once since employment</p> <p>Once a year</p> <p>Every 6 months</p> <p>Every 3 months</p> <p>Every month</p> <p>Every week</p> <p>Every day</p> <p>Don't know/not applicable</p>	<p>Mandatory</p> <p>Select one</p>

Intent	Question	Response	Response type
	<p>Perform work tasks or use work methods that you are not familiar with.</p> <p>Interact with hazardous substances such as chemicals, flammable liquids, and gases.</p> <p>Work in a bent, twisted, or awkward posture.</p> <p>Work at a height that is 2 metres or more above the ground or floor.</p> <p>Work in noise levels that are so high that you have to raise your voice when talking to people less than 1 metre away.</p> <p>Stand for more than 2 hours in a row.</p> <p>Experience bullying or harassment at work (repeated and unreasonable behaviour including, abusive or offensive language or comments; belittling or humiliating comments, practical jokes or initiation; unjustified criticism or complaints).</p> <p>If selected 2 to 8 for Q8.9, ask the following question:</p> <p>9a. Please identify the type of bullying or harassment that you have experienced. Select all that apply.</p>	<p>Verbal (e.g. abusive or offensive language; belittling or humiliating comments; practical jokes or initiation; unjustified criticism or complaints)</p> <p>Physical (e.g. hitting, kicking, pushing, practical jokes or initiation)</p> <p>Sexual (e.g. unwelcome sexual conduct, inappropriate physical contact, intrusive</p>	<p>Skip logic</p> <p>Select all that apply</p> <p>Text input option</p>

Intent	Question	Response	Response type
		personal questions, sexual jokes, sexual messages) Psychological (e.g. making impossible demands, imposing unreasonable deadlines) Discrimination (e.g. discrimination on race, culture, education, economic background) Prefer not to say Other, please specify [free input]	
	<p>9b. In the last question you indicated that you have experienced bullying/harassment at work.</p> <p>We want to ensure that you know about the support that is available to you. If you feel as though you need some additional help.</p> <p>Please click here for support services. <i>(open in a new window)</i></p> <p>The next questions ask about reporting of bullying and harassment at work. Would you like to answer these questions?</p>	Yes No	Skip logic Select one
	If selected 1 for Q9b, ask the following questions for each type of bullying/harassment selected in Q9a:	Always Sometimes	Skip logic Select one

Intent	Question	Response	Response type
	<p>9c1. You mentioned you have experienced <verbal> bullying / harassment, How often have you reported this kind of incidents?</p> <p>9c2. Who did you report the incident(s) to?</p> <p>9c3. What was the outcome of your report(s)?</p> <p>9c4. What would you have liked to see happen?</p> <p>9c5. What were the reasons that you didn't report?</p>	<p>Never (Skip logic) Prefer not to say (Skip logic)</p> <p>A family member or friend A co-worker or peer at your same level Your manager or supervisor Human resource department An External agency (e.g. Fair Work Commission, Australian Human Rights Commission or Safework NSW).</p> <p>There were no changes at the organisation following your report Your employer apologised for failing to prevent the bullying/harassment Your employer advised the organisation that such conduct had occurred, and it was unacceptable Your employer developed or changed the existing policy on bullying/harassment - (e.g. complaint procedure) Your employer implemented training or education You were transferred to another team or department within the workplace Unsure/Prefer not to say Other action took place (please specify)</p> <p>Your employer apologises for failing to prevent the bullying/harassment Your employer advises the organisation that such conduct had occurred, and it was unacceptable</p>	<p>Select all that apply</p> <p>Select all that apply</p> <p>Select all that apply Skip to Q9.1 after the last option</p> <p>Select all that apply</p>

Intent	Question	Response	Response type
		<p>Your employer develops or changes the existing policy on bullying/harassment - (e.g. complaint procedure)</p> <p>Your employer implements training or education</p> <p>Other actions (please specify)</p> <p>It wasn't serious enough</p> <p>I was embarrassed</p> <p>I was afraid that my report would not be believed or taken seriously</p> <p>I was afraid that my relationships at work would be negatively affected</p> <p>I was afraid that my career negatively impacted.</p> <p>Other, please specify</p>	
Q9. Job quality	<p>Job quality: This part asks about psychosocial quality of your job.</p> <p>For each item below, please indicate how much you agree or disagree with the statement.</p> <p>[Job demands and complexity]</p> <p>My job is more stressful than I had ever imagined.</p> <p>My job is complex and difficult.</p> <p>My job is demanding and fast paced.</p> <p>My job often requires me to learn new skills.</p> <p>I use many of my skills and abilities in my current job.</p> <p>I regularly do work outside of my worktime.</p> <p>[Job control]</p> <p>I have a lot of freedom to decide how I do my own work.</p>	<p>Strongly disagree</p> <p>Disagree</p> <p>Somewhat disagree</p> <p>Neither agree nor disagree</p> <p>Somewhat agree</p> <p>Agree</p> <p>Strongly agree</p> <p>Don't know/ not applicable</p>	Mandatory Select one

Intent	Question	Response	Response type
	<p>I have a lot of say about what happens on my job. I have a lot of freedom to decide when I do my work.</p> <p>[Job security] I have a secure future in my job. The place I work for will still be in business 5 years from now. I worry about the future of my job.</p> <p>[Effort reward fairness] I get paid fairly for the things I do in my job.</p> <p>[Burnout] I feel drained by my work. I worry about work when I am not working. I find it hard to disconnect from work.</p>		
Q10. Work health and safety awareness	<p>Work Health and Safety awareness: This part explores your awareness of work health and safety, e.g., hazards, the rights and responsibilities of both employees and employers. For each item below, please indicate how much you agree or disagree with the statement. At my workplace...</p> <p>I am clear about my rights and responsibilities in relation to workplace health and safety. I am clear about my employer’s rights and responsibilities in relation to workplace health and safety. I know how to perform my job in a safe manner. If I became aware of a health or safety hazard at my workplace, I know who (at my workplace) I would report it to. I have the knowledge to assist in responding to any health and safety concerns at my workplace.</p>	<p>Strongly disagree Disagree Neither agree nor disagree Agree Strongly agree</p> <p>Don’t know / not applicable</p>	Mandatory Select one

Intent	Question	Response	Response type
	I know what the necessary precautions are that I should take while doing my job.		
Q11. Participation in work health and safety	<p>Participation in work health and safety: This part explores your ability to ask questions about, and participate in, health and safety at work. For each item below, please indicate how much you agree or disagree with the statement. At my workplace....</p> <p>I feel free to voice concerns or make suggestions about workplace health and safety at my job.</p> <p>If I notice a workplace hazard, I would point it out to management.</p> <p>I know that I can stop work if I think something is unsafe and management will not give me a hard time.</p> <p>If my work environment was UNSAFE, I WOULD NOT say anything, and hope that the situation eventually improves.</p> <p>I have enough time to complete my work tasks safely.</p> <p>I have a good working relationship with my manager.</p>	<p>Strongly disagree</p> <p>Disagree</p> <p>Neither agree nor disagree</p> <p>Agree</p> <p>Strongly agree</p> <p>Don't know / not applicable</p>	Mandatory Select one
Q12. Work health and safety policies and procedures	<p>Workplace policies and procedures: This part asks about the kinds of policies and systems in place to make the workplace safe.</p> <p>For each item below, please indicate how much you agree or disagree with the statement.</p> <p>At my workplace...</p> <p>Everyone receives the necessary health and safety training when starting a job, changing jobs, or using new techniques.</p> <p>There is regular communication between workers and management about health and safety issues.</p>	<p>Strongly disagree</p> <p>Disagree</p> <p>Neither agree nor disagree</p> <p>Agree</p> <p>Strongly agree</p>	Mandatory Select one

Intent	Question	Response	Response type
	<p>Systems are in-place to identify, prevent and deal with hazards at work.</p> <p>There is an active and effective health and safety committee, and/or health and safety representative.</p> <p>Incidents and accidents are investigated quickly in order to improve workplace health and safety.</p> <p>Communication about workplace health and safety procedures is done in a way that I can understand.</p> <p>Workplace health and safety is considered to be at least as important as production and quality in the way work is done.</p>	<p>Don't know/ not applicable</p>	
<p>Q13. Organisation's Commitment and Practice</p>	<p>Commitment to health and safety: This part asks about your organisation's WHS commitment and practice.</p> <p>For each item below, please indicate how much you agree or disagree with the statement.</p> <p>At my workplace...</p> <p>Supervisors are supported to make decisions to aid the physical and psychological safety of all workers.</p> <p>Leaders demonstrate a commitment to healthy work creating a strong safety culture.</p> <p>Systems are in-place to proactively manage hazards that could affect my mental health.</p> <p>WHS is a priority when new technology is introduced, including assessing and managing risks; consulting and communicating with workers; and conducting training in the safe use.</p> <p>I have confidence that my privacy and confidentiality is protected when new technology is introduced.</p>	<p>Strongly disagree</p> <p>Disagree</p> <p>Neither agree nor disagree</p> <p>Agree</p> <p>Strongly agree</p> <p>Don't know / not applicable</p>	<p>Mandatory Select one</p>

Intent	Question	Response	Response type
	Systems are in place to manage WHS in support of flexible work practices and flexible work environments.		
Q14. Barriers and enablers for good WHS practice	<p>What stands in the way of good WHS practice at your work? Please select all that apply.</p> <ul style="list-style-type: none"> Limited understanding of the WHS obligations It's too complex, I don't know where to start Limited knowledge of the specific risks and hazards present in the workplace Cost implications Time constraints or lack of resources No expertise to manage WHS Prioritising items believed to be more important over work health and safety Other [free format field] Unsure <p>What drives good WHS practice at your work? Please select all that apply.</p> <ul style="list-style-type: none"> Return on investment, safe business is good business Strong leadership and commitment Adequate resources including people and safety equipment Risk assessment and active management Communication and consultation with all workers Training and education Good reporting systems Investigation and mitigating action post incident Other [free format field] Unsure 	[tick those applicable]	Mandatory Select all that apply

Intent	Question	Response	Response type
	<p>What would make WHS more of a priority at your work?</p> <p>Please select all that apply.</p> <p>If it was more valued by workers</p> <p>If it was more valued by customers and investors</p> <p>If it was more financially rewarding</p> <p>If it was simpler to understand</p> <p>If we thought we were at risk of getting caught by the regulator</p> <p>If we thought someone might get seriously hurt</p> <p>If it would impact on the business's reputation</p> <p>Other [free format field]</p> <p>Unsure</p>		
Future of Work			
Q15. Changes	<p>In the past six months, have you experienced or witnessed any new or emerging health and safety issues?</p> <p>Please select all that apply.</p> <p>Issues from new or emerging ways of working or types of work</p> <p>Issues from new or emerging technologies or workplace innovations</p> <p>Issues from new or emerging behaviours, attitudes, or practices (either yours or other people in your workplace)</p> <p>Other new or emerging issues</p> <p>None of the above</p>	[Select all that apply]	Mandatory
Q15.1.a	<p>[skip if Types of work have not been selected in Q15.1]</p> <p>Would you be able to provide more detail about the different issues you chose in the previous question?</p>	[Free input]	Text input Mandatory

Intent	Question	Response	Response type
Q15.2.b	[skip if Technologies have not been selected in Q15.2] Would you be able to provide more detail about the different issues you chose in the previous question?	[Free input]	Text input Mandatory
Q15.3.c	[skip if Behaviours have not been selected in Q15.3] Would you be able to provide more detail about the different issues you chose in the previous question?	[Free input]	Text input Mandatory
Q15.4.d	[skip if Other have not been selected in Q15.4] Would you be able to provide more detail about the different issues you chose in the previous question?	[Free input]	Text input Mandatory
Q16.	In the past six months, have you seen anything new that can improve health and safety in your workplace? Please select all that apply. New WHS guides, resources, or materials New legislation or codes of practices in Australia or internationally New technology that has the potential to prevent harm Other new solutions that have the potential to prevent harm None of the above	[Select all that apply]	Mandatory
Q16.1.a	[skip if Resources and materials has not been selected in Q16.1] Would you be able to provide more detail about the different issues you chose in the previous question?	[Text input]	Text input Mandatory

Intent	Question	Response	Response type
Q16.2.b	[skip if Legislation has not been selected in Q16.2] Would you be able to provide more detail about the different issues you chose in the previous question?	[Text input]	Text input Mandatory
Q16.3.c	[skip if Technology has not been selected in Q16.3] Would you be able to provide more detail about the different issues you chose in the previous question?	[Text input]	Text input Mandatory
Q16.4.d	[skip if Other has not been selected in Q16.4] Would you be able to provide more detail about the different issues you chose in the previous question?	[Text input]	Text input Mandatory
Q17. General observations	Is there anything else you have seen in regard to work health and safety that you would like to flag? Please click 'Next' if you don't have anything extra to add.	[Text input]	Select one Mandatory
<p>About you Please tell us a little bit more about you. We won't be able to identify you individually by the information you've provided. However, you only have to share what you are comfortable sharing.</p>			
Q18. Gender	What gender do you identify as?	Male Female Non-binary I use another term [Text input] Prefer not to say	Optional Select one Text input
Q19. Age	What is your age group?	18 to 24	Optional

Intent	Question	Response	Response type
		25 to 34 35 to 44 45 to 54 55 to 64 65 or over Prefer not to say	Select one
Q20. Education	What is your highest level of education?	Year 11 or below Year 12 Trade Certificate/ Certificate III/IV Advanced Diploma/Diploma Bachelor's degree Graduate Diploma/Graduate Certificate Postgraduate Degree Prefer not to say	Optional Select one
Q21. Diversity	Do identify as being part of any of the following communities? Please select all that apply.	LGBTQI+ Aboriginal or Torres Strait Islander Culturally and/or linguistically diverse Migrant or temporary resident People living with a disability None of the above Prefer not to say	Optional Select all that apply
Q22. Language	Which language did you first speak as a child?	English Other, please specify [Text input] Prefer not to say	Optional Select one

Appendix B: Survey Engagement Strategy

Framework

Preceding the development of the Engagement Plan for this iteration of the National WHS Survey, and utilising the learnings from the iteration run in Autumn 2023 edition, an evaluative framework was developed as an oversight for all future versions of the survey.

The intention of this framework is to design goals and measures that can:

1. Guide the development of distribution strategies for each survey iteration;
2. Act as long-term measurement tool for survey participation over time; and
3. Improve the rigor of the survey by increasing participation.

The framework supports the overarching goals of the Radar initiative in gathering WHS insights from diverse information sources.

The framework identifies constants that will be measured across all survey iterations, including:

- Target audience groups – representative of high-risk and vulnerable groups who sometimes struggle to be represented in quantitative data;
- Target figures – based on a stratified approach, aiming for representation from groups that is statistically significant; and
- Specified metrics – providing measurements for each audience group related to survey completion and attrition.

Channels

Engagement with the National WHS Survey was encouraged through a range of channels that fell into the following categories.

- Owned – channels that are coordinated and branded to the Centre for Work Health and Safety (the Centre);
- Earned – channels controlled by different entities who distributed content on the Centre's behalf; and
- Paid – any channel where advertising was transactional.

The channel types included social media channels, websites, emails (i.e. contact lists), paid social ads, newsletter inclusions, and direct network contacts.

Tracking

In order to get an understanding of audience traffic, audience group, and completion rates, URL tracking tags were used using Qualtrics inbuilt tracking capabilities.

To ensure anonymity, all factors that could link individual identity to responses were removed from the process. That is, only the Science Outreach team were able to link tracking tags to specific content, and only the Evaluation team were able to see responses, which were anonymised in any case.

Results

Broken down by medium, social media provided the highest response rate, however paid ads received the highest click-throughs, as set out in the table below.

Medium	Total starts	Completes	Incompletes	Completion rate
Email	188	153	35	81.38%
Paid	1124	591	533	52.58%
Referral	75	59	16	78.67%
Social	962	724	238	75.26%
No medium specified	18	13	5	72.22%

Considering distribution channels and response, despite having such a high start rate, paid ads through Facebook saw a low completion rate. One of the most notable channels was through other Department of Customer Service social media streams, receiving a total of 603 starts with a completion rate of 73.47%.

When looking at channel categories:

- highest completion rate sat in Owned channels;
- most completions came through Paid channels;
- but the best overall performance came through Earned channels.

Channel category	Total starts	Completes	Incompletes	Completion rate
Owned	585	463	122	79.15%
Earned	640	473	167	73.91%
Paid	1124	591	533	52.58%

Considering targeted industries, there was an overall lower than average completion rate across all industries. That is not to be confused with the overall industry totals which had a high overall completion rate (83.02%), this is just citing those individuals who were targeted specifically through paid ads.

Target industry	Total starts	Completes	Incompletes	Completion rate
Arts and Recreational Services	82	39	43	47.56%
Construction	98	51	47	52.04%
Healthcare	124	78	46	62.90%
Manufacturing	13	5	8	38.46%
Professional, Scientific and Technical Services	329	189	140	57.45%
Transport, Postal and Warehousing	238	94	144	39.50%

Moving forward, we will be able to track the success of the Engagement Strategy over time, between iterations of the survey, using the evaluative framework that has been developed.

Appendix C: Methods to calculate OHSVM sub-scales, psychosocial job quality adversity and normalised index scores.

OHSVM: including 4 sub-scales Exposure to hazards, policies and procedures (PP), awareness (AW), and empowerment (EM); and an overall vulnerability.

- The sub-scale Exposure to hazards includes 10 statements asking survey participants to respond to their frequency (ranging from never, once a year, every 6 months, every 3 months, every month, every week to every day) of exposure to various hazards at their workplace. A worker was considered “exposed to hazards” in the workplace if they reported:
 - experiencing two or more of the ten hazards (noting that bullying and harassment were separated) weekly or more often, or
 - experiencing at least one of the following weekly or more often:
 - work involving lifting or carrying 20kg at least 10 times a day,
 - work at heights greater than two metres,
 - work with hazardous substances such as chemicals, flammable liquids, and gases,
 - being bullied, or
 - being harassed at work.
- In the other sub-scales, there are seven statements for PP, six for AW and five for EM. Participants were asked to provide their level of agreement in five-point Likert scale, from strongly disagree (1) to strongly agree (5). A worker was considered to have met criteria for “inadequate PP”, “inadequate AW”, or “inadequate EM” if they:
 - disagreed or strongly disagreed with one or more of the statements within each sub-scale.
 - For overall vulnerability, a worker was considered “vulnerable” if they reported:
 - having “exposed to hazards” in the workplace; and
 - “inadequate” for one or more of PP, AW or EM.

Psychosocial Job Quality Index (PJQI): There are four sub-scales within PJQI indicating measures for (1) Job demands and complexity, (2) Job control, (3) Job security and (4) Effort reward fairness. Similar to OHSVM, there are a number of statements within each sub-scale (4 on job demands and complexity, 3 on job control, 3 on job security and 1 on effort reward fairness). Binary variables were created to dichotomise the PJQI sub-scales into “high” job

demand, “low” job control, “low” job security and “unfair” effort-reward based on the total score for each sub-scale. The total score for each sub-scale was the sum of all the responses to the statements within that sub-scale. When there were one or more, but not all missing values within a sub-scale, they would be imputed using the average values across other statements within the same sub-scale. If all responses were missing, the sub-scale score would be coded as missing.

- The binary variable for “high” job demand for a worker would take the value of 1 when their total score for job demand and complexity sub-scale was greater than a cut-off point, which is the fourth quartile, corresponding to the greatest difficulty.
- The binary variable for “low” job control (and similarly for “low” job security and “unfair” effort-reward) for a worker would take the value of 1 when their total score for job control sub-scale was smaller than the cut-off point, corresponding to the greatest difficulty, which is the first quartile for this sub-scale.
- The overall PJQ index was derived as the sum of the four binary variables above, indicating the number of adversities. Optimal jobs had 0 adversity, whereas poor jobs had 3 or more adversities.

Normalised index scores:

- Burnout Index ranging from 0 (no burnout) to 100 (complete burnout) was calculated as the average score of responses to three statements on burnout (Strongly disagree = 0; Disagree = 25; Neither = 50; Agree = 75; Strongly agree = 100).
- WHS Awareness Index, similarly, is the average score of responses six statements on AW.
- WHS Empowerment Index is the average score of responses to six statements on EM.
- WHS System Index is the average score of responses to seven statements on PP.
- WHS Commitment Index is the average score of responses to six statements on commitment.